

Finance and Business Operations Division

Procurement and Contract Services Section
Department of Executive Services
EXC-FI-0862
Exchange Building, 8th Floor
821 Second Avenue
Seattle, WA 98104-1598

206-684-1681 206-684-1147 Fax TTY Relay: 711 www.metrokc.gov

RE: Registration for Bidders' List

Thank you for your interest in doing business with King County. A registration form for the King County Procurement & Contract Service's bidders' list is enclosed for your use. Please complete the forms and return it to the above address. Once you have submitted the registration form, call the Procurement & Contract Services Section to discuss your firm's capabilities with the buyer assigned to the commodities or services your provide.

In accordance with contract prequalification requirements included in King County Code Chapter 12.16, your firm must have a current Personnel Inventory Report (PIR) on file at the Procurement & Contract Services Section prior to a contract award or aggregate of awards annually totaling \$25,000 or more. The code also requires a submission of a **NOTARIZED** Affidavit and Certificate of Compliance when orders during any one-year period are expected to amount to \$25,000 or more.

The purpose of prequalification is to ensure that persons or companies doing business with King County are Equal Opportunity Employers and that they do not discriminate against individuals because of their creed, religion, race, color, sex, age, marital status, sexual orientation, national origin or disabilities, unless such policies or priorities are necessary for the performance of the job.

Although submission of contract prequalification forms are not required for your firm to be placed on the bidders' list, delays in placing orders may occur if the completed documents are not on file. After the initial submission, a PIR must be updated and resubmitted once every two years. The affidavit remains valid as long as an updated PIR is submitted once every two years.

Copies of King County Code Chapter 12.16 are available upon request. If you have any questions concerning King County's contract prequalification requirements, you may contact me at (206) 263-4272.

Sincerely

Valerie Sparkis

Compliance Coordinator

Valerie Sparkis

Enclosure

12.16.060 Contractor eligibility. The administrator may require that prior to being awarded a county contract, contractors must first be determined eligible by the administrator as having complied with the provisions of this chapter. The county shall not enter into a contract with nor receive goods and/or services from a contractor that has not been determined eligible as required by this chapter.

A. WORK FORCE DATA. All contractors entering into contracts or agreements with the county valued at twenty-five thousand dollars or more shall submit to the contract awarding authority a personnel inventory report providing employment data for minorities, women and persons with disabilities, except for public works contractors. Public works contractors shall submit to the contract awarding authority a personnel inventory report when entering into contracts or agreements valued at over ten thousand dollars. This requirement shall also apply to contractors who accumulate contracts which total twenty-five thousand dollars or more in a given calendar year. The administrator may determine the form in which this data shall be provided.

B. COMPLIANCE AFFIDAVITS AND UNION STATEMENTS. All contractors, except public works contractors, entering into contracts with the county of more than twenty-five thousand dollars, or which in the aggregate result in yearly sales to the county of more than twenty-five thousand dollars, shall submit an affidavit of compliance, in the form provided by the county, demonstrating their commitment to comply with the provisions of this chapter, and shall further submit a signed statement of compliance from a union or employee referral agency. Public works contractors entering into contracts of ten thousand dollars or more shall submit an affidavit of compliance and a statement from a union or employee referral agency. The contractor shall abide by all the terms and conditions set forth in the affidavit. The affidavit of compliance shall state the reporting requirements for each contractor, the requirements of subcontractors, the employment goals for minorities, women and persons with disabilities, minimum affirmative action measures, reporting requirements and other such provisions as the administrator deems necessary and appropriate for compliance with and enforcement of this chapter; provided, that in lieu of the affidavit, the administrator may accept a statement pledging adherence to existing contractor affirmative action measures where the provisions of these measures are found by the administrator to substantially fulfill the requirements of this chapter.

C. VENDORS, YEARLY RENEWALS. Vendors who became qualified under subsections A. and B. of this section shall remain so qualified for two years after the date on which they were qualified and shall be entitled to bid and be considered for the sale of materials, supplies and equipment at any time during that period without requalification.

During such time as a vendor remains continuously qualified under this chapter to do business with the county, the affidavit of compliance initially submitted to gain qualification shall be deemed to be effective and in force without further renewal or resubmission. Should qualification lapse or be terminated at any time due to a change of ownership in the business or to a failure to submit an updated employment profile or upon a finding of violation of this chapter, the county having previously complied with notice of hearing provisions, a new affidavit of compliance and employment profile shall be required prior to vendor's being requalified.

D. SELF EVALUATION, CORRECTIVE ACTION PLAN AND ASSURANCE OF COMPLIANCE. In order to comply with Section 504 of the federal Rehabilitation Act of 1973, as amended, all contractors entering into contracts with the county, except those for the direct purchase of goods, shall complete and maintain in their office a Section 504 self evaluation and corrective action plan. These plans are to be used by the contractor to review program, facility, and employment access by persons with disabilities and to determine what kind of corrective action may be needed. An assurance of compliance, contained in the corrective action plan, must be signed, notarized and returned to the administrator before the contract will be signed by the county.

Contractors who believe that taking corrective action will cause an undue administrative or financial burden may complete and submit an accessibility waiver request form to the administrator. The administrator will approve or disapprove the request, and notify the contractor in writing regarding the decision. The administrator shall be responsible for devising and promulgating criteria to be used in determining whether or not to grant a request for waiver from the requirement to complete and maintain a Section 504 self evaluation and corrective action plan. (Ord. 11992 § 8, 1995).

12.16.070 Statements from unions or employee referral agencies. Contractors required to submit affidavits and certificates of compliance shall also submit statements from unions or employee referral agencies, as applicable, on forms provided by the administrator. The statement shall be in writing, signed by the authorized officers or agents of all labor unions or agencies referring workers or employees or providing or supervising apprenticeship or other training programs from whom the contractor obtains employees. The statement shall affirm that the signer(s)'s organization has no practices and policies which discriminate on the basis of race, color, creed, religion, sex, age, sexual orientation, marital status, the presence of any physical, mental or sensory disability, or national origin, that the signer(s)'s organization will affirmatively cooperate in the implementation of the policies and provisions of this chapter, and that the organization consents and agrees that recruitment, employment, and the terms and conditions of employment under all contracts with the county shall be in accordance with the purposes and provisions of this chapter. (Ord. 11992 § 9, 1995).

Registration Form

For Contractors/ Suppliers/ Consultants Offering to Furnish Goods and Services



Department of Executive Services
Finance and Business Operations Division
Procurement and Contract Services Section
Exchange Bldg. 8th Flr., 821 Second Avenue
Seattle, WA 98104-1598
Tel. No. (206) 684-1681 Fax (206) 684-1147
TTY (206) 296-0100 M.S. EXC-FI-0862

Persons or businesses wishing to be added to King County's bidders' file for goods or services shall submit this properly completed registration form and return it to the King County Procurement Services Division.

Formal Invitations to Bid and Request for Proposals appear regularly in the SEATTLE TIMES Legal Notices Section.

Failure to respond to an Invitation to Bid or Request for Proposal, either by submitting a bid, a "no-bid", or an explanatory letter may result in deletion of the recipient's name from bidders' lists.

Fill in all spaces. Insert "NA" for "not applicable" TYPE OR PRINT ALL ENTRIES.

| 1. | Legal name of busines | s: | | | | | | | | | |
|-----|---|---|---|----------------|----------------|------|--|--|--|--|--|
| | dba (if applicable) | | | | | | | | | | |
| | Street address | | Mailing Address | | | | | | | | |
| | City/ State | Zip | Telephone | | | | | | | | |
| 2. | Type of Organization (0 | Check One) | | | | | | | | | |
| | Individual Owner | Partnership | Non-Profit Organiz | zation | Corporation | | | | | | |
| | Incorporated under the | Laws of the State of | | | | | | | | | |
| | * Minority Owned | * Women Owned | * M/WB | Combo | Other | | | | | | |
| | Business Enterprise (COMWBE at (360) 753- | siness (M/WB) is a busine DMWBE) of the State of W 9693 for information on ce tract Compliance Division | ashington as a minority/ rtification procedures. C | women's bus | iness. Contact | ıess | | | | | |
| 3. | Names of Officers, Own | Names of Officers, Owners or Partners | | | | | | | | | |
| | President | Vice President | Secre | etary/Treasure | er | | | | | | |
| | Owners or Partners | | | | | | | | | | |
| | Point of Contact for Price Quotations | | | | | | | | | | |
| 4. | List the Equipment, Su | pplies, Materials and/or | Services on which you | ı desire to bi | d | | | | | | |
| | _ | | | | | | | | | | |
| | _ | | | | | | | | | | |
| | _ | | | | | | | | | | |
| Sic | ınature | | | | | | | | | | |
| ٥ | <u> </u> | Authorized Agent | | Date | | | | | | | |

Form (Rev. January 2005)
Department of the Treasury

Request for Taxpayer Identification Number and Certification

Give form to the requester. Do not send to the IRS.

| ge 2. | Name (as shown on your income tax return) | | | | | | | |
|--|---|------------------------------|--------------------------------|------------------------------|-------------------|-----------------|--|--|
| on page | Business name, if different from above | | | | | | | |
| Print or type Specific Instructions | Check appropriate box: Individual/ Corporation Partnership Other | | Exempt from backup withholding | | | | | |
| Print o | Address (number, street, and apt. or suite no.) | Requester's | s name and | address (op | tional) | | | |
| pecific | City, state, and ZIP code | | | | | | | |
| See S | List account number(s) here (optional) | | | | | | | |
| Part | Taxpayer Identification Number (TIN) | | | | | | | |
| backu alien, | your TIN in the appropriate box. The TIN provided must match the name given on Line 1 p withholding. For individuals, this is your social security number (SSN). However, for a r sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other ent mployer identification number (EIN). If you do not have a number, see <i>How to get a TIN</i> | esident ities, it is | Social sec | eurity number + + or | er | | | |
| Note. to ente | If the account is in more than one name, see the chart on page 4 for guidelines on whoser. | e number | Employer | identificatio | n numb | per | | |
| Part | II Certification | | | | | | | |
| Under | penalties of perjury, I certify that: | | | | | | | |
| 1. Th | e number shown on this form is my correct taxpayer identification number (or I am waiting | ng for a numb | ber to be i | ssued to n | ne), and | d | | |
| Re | 2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding, and | | | | | | | |
| 3. I a | 3. I am a U.S. person (including a U.S. resident alien). | | | | | | | |
| withho For me arrang | cation instructions. You must cross out item 2 above if you have been notified by the IRS olding because you have failed to report all interest and dividends on your tax return. For ortgage interest paid, acquisition or abandonment of secured property, cancellation of dement (IRA), and generally, payments other than interest and dividends, you are not reque your correct TIN. (See the instructions on page 4.) | real estate trebt, contribut | ransaction ions to an | s, item 2 d individual | oes no retirem | t apply. ent | | |
| Sign Here | Signature of U.S. person ▶ | Date ▶ | | | | | | |

Purpose of Form

A person who is required to file an information return with the IRS, must obtain your correct taxpayer identification number (TIN) to report, for example, income paid to you, real estate transactions, mortgage interest you paid, acquisition or abandonment of secured property, cancellation of debt, or contributions you made to an IRA.

U.S. person. Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN to the person requesting it (the requester) and, when applicable, to:

- 1. Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
- 2. Certify that you are not subject to backup withholding, or
- 3. Claim exemption from backup withholding if you are a U.S. exempt payee.

Note. If a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.

For federal tax purposes you are considered a person if you are:

- \bullet An individual who is a citizen or resident of the United States,
- A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States, or

• Any estate (other than a foreign estate) or trust. See Regulations sections 301.7701-6(a) and 7(a) for additional information.

Foreign person. If you are a foreign person, do not use Form W-9. Instead, use the appropriate Form W-8 (see Publication 515, Withholding of Tax on Nonresident Aliens and Foreign Entities).

Nonresident alien who becomes a resident alien. Generally, only a nonresident alien individual may use the terms of a tax treaty to reduce or eliminate U.S. tax on certain types of income. However, most tax treaties contain a provision known as a "saving clause." Exceptions specified in the saving clause may permit an exemption from tax to continue for certain types of income even after the recipient has otherwise become a U.S. resident alien for tax purposes.

If you are a U.S. resident alien who is relying on an exception contained in the saving clause of a tax treaty to claim an exemption from U.S. tax on certain types of income, you must attach a statement to Form W-9 that specifies the following five items:

- 1. The treaty country. Generally, this must be the same treaty under which you claimed exemption from tax as a nonresident alien.
- 2. The treaty article addressing the income.
- 3. The article number (or location) in the tax treaty that contains the saving clause and its exceptions.

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4. The type and amount of income that qualifies for the exemption from tax.

5. Sufficient facts to justify the exemption from tax under the terms of the treaty article.

Example. Article 20 of the U.S.-China income tax treaty allows an exemption from tax for scholarship income received by a Chinese student temporarily present in the United States. Under U.S. law, this student will become a resident alien for tax purposes if his or her stay in the United States exceeds 5 calendar years. However, paragraph 2 of the first Protocol to the U.S.-China treaty (dated April 30, 1984) allows the provisions of Article 20 to continue to apply even after the Chinese student becomes a resident alien of the United States. A Chinese student who qualifies for this exception (under paragraph 2 of the first protocol) and is relying on this exception to claim an exemption from tax on his or her scholarship or fellowship income would attach to Form W-9 a statement that includes the information described above to support that exemption.

If you are a nonresident alien or a foreign entity not subject to backup withholding, give the requester the appropriate completed Form W-8.

What is backup withholding? Persons making certain payments to you must under certain conditions withhold and pay to the IRS 28% of such payments (after December 31, 2002). This is called "backup withholding." Payments that may be subject to backup withholding include interest, dividends, broker and barter exchange transactions, rents, royalties, nonemployee pay, and certain payments from fishing boat operators. Real estate transactions are not subject to backup withholding.

You will not be subject to backup withholding on payments you receive if you give the requester your correct TIN, make the proper certifications, and report all your taxable interest and dividends on your tax return.

Payments you receive will be subject to backup withholding if:

- 1. You do not furnish your TIN to the requester, or
- 2. You do not certify your TIN when required (see the Part II instructions on page 4 for details), or
- 3. The IRS tells the requester that you furnished an incorrect TIN, or
- 4. The IRS tells you that you are subject to backup withholding because you did not report all your interest and dividends on your tax return (for reportable interest and dividends only), or
- 5. You do not certify to the requester that you are not subject to backup withholding under 4 above (for reportable interest and dividend accounts opened after 1983 only).

Certain payees and payments are exempt from backup withholding. See the instructions below and the separate Instructions for the Requester of Form W-9.

Penalties

Failure to furnish TIN. If you fail to furnish your correct TIN to a requester, you are subject to a penalty of \$50 for each such failure unless your failure is due to reasonable cause and not to willful neglect.

Civil penalty for false information with respect to withholding. If you make a false statement with no reasonable basis that results in no backup withholding, you are subject to a \$500 penalty.

Criminal penalty for falsifying information. Willfully falsifying certifications or affirmations may subject you to criminal penalties including fines and/or imprisonment.

Misuse of TINs. If the requester discloses or uses TINs in violation of federal law, the requester may be subject to civil and criminal penalties.

Specific Instructions

Name

If you are an individual, you must generally enter the name shown on your social security card. However, if you have changed your last name, for instance, due to marriage without informing the Social Security Administration of the name change, enter your first name, the last name shown on your social security card, and your new last name.

If the account is in joint names, list first, and then circle, the name of the person or entity whose number you entered in Part I of the form.

Sole proprietor. Enter your individual name as shown on your social security card on the "Name" line. You may enter your business, trade, or "doing business as (DBA)" name on the "Business name" line.

Limited liability company (LLC). If you are a single-member LLC (including a foreign LLC with a domestic owner) that is disregarded as an entity separate from its owner under Treasury regulations section 301.7701-3, enter the owner's name on the "Name" line. Enter the LLC's name on the "Business name" line. Check the appropriate box for your filing status (sole proprietor, corporation, etc.), then check the box for "Other" and enter "LLC" in the space provided.

Other entities. Enter your business name as shown on required Federal tax documents on the "Name" line. This name should match the name shown on the charter or other legal document creating the entity. You may enter any business, trade, or DBA name on the "Business name" line.

Note. You are requested to check the appropriate box for your status (individual/sole proprietor, corporation, etc.).

Exempt From Backup Withholding

If you are exempt, enter your name as described above and check the appropriate box for your status, then check the "Exempt from backup withholding" box in the line following the business name, sign and date the form.

Generally, individuals (including sole proprietors) are not exempt from backup withholding. Corporations are exempt from backup withholding for certain payments, such as interest and dividends.

Note. If you are exempt from backup withholding, you should still complete this form to avoid possible erroneous backup withholding.

Exempt payees. Backup withholding is not required on any payments made to the following payees:

- 1. An organization exempt from tax under section 501(a), any IRA, or a custodial account under section 403(b)(7) if the account satisfies the requirements of section 401(f)(2),
- 2. The United States or any of its agencies or instrumentalities,
- 3. A state, the District of Columbia, a possession of the United States, or any of their political subdivisions or instrumentalities,
- 4. A foreign government or any of its political subdivisions, agencies, or instrumentalities, or
- 5. An international organization or any of its agencies or instrumentalities.

Other payees that may be exempt from backup withholding include:

6. A corporation,

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- 7. A foreign central bank of issue,
- 8. A dealer in securities or commodities required to register in the United States, the District of Columbia, or a possession of the United States.
- 9. A futures commission merchant registered with the Commodity Futures Trading Commission,
 - 10. A real estate investment trust,
- 11. An entity registered at all times during the tax year under the Investment Company Act of 1940,
- 12. A common trust fund operated by a bank under section 584(a),
 - 13. A financial institution.
- 14. A middleman known in the investment community as a nominee or custodian, or
- 15. A trust exempt from tax under section 664 or described in section 4947.

The chart below shows types of payments that may be exempt from backup withholding. The chart applies to the exempt recipients listed above, 1 through 15.

| IF the payment is for | THEN the payment is exempt for |
|--|--|
| Interest and dividend payments | All exempt recipients except for 9 |
| Broker transactions | Exempt recipients 1 through 13. Also, a person registered under the Investment Advisers Act of 1940 who regularly acts as a broker |
| Barter exchange transactions and patronage dividends | Exempt recipients 1 through 5 |
| Payments over \$600 required to be reported and direct sales over \$5,000 ¹ | Generally, exempt recipients 1 through 7 ² |

¹See Form 1099-MISC, Miscellaneous Income, and its instructions.

Part I. Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. If you are a resident alien and you do not have and are not eligible to get an SSN, your TIN is your IRS individual taxpayer identification number (ITIN). Enter it in the social security number box. If you do not have an ITIN, see *How to get a TIN* below.

If you are a sole proprietor and you have an EIN, you may enter either your SSN or EIN. However, the IRS prefers that you use your SSN.

If you are a single-owner LLC that is disregarded as an entity separate from its owner (see *Limited liability company (LLC)* on page 2), enter your SSN (or EIN, if you have one). If the LLC is a corporation, partnership, etc., enter the entity's FIN

Note. See the chart on page 4 for further clarification of name and TIN combinations.

How to get a TIN. If you do not have a TIN, apply for one immediately. To apply for an SSN, get Form SS-5, Application for a Social Security Card, from your local Social Security Administration office or get this form online at www.socialsecurity.gov/online/ss-5.pdf. You may also get this form by calling 1-800-772-1213. Use Form W-7, Application for IRS Individual Taxpayer Identification Number, to apply for an ITIN, or Form SS-4, Application for Employer Identification Number, to apply for an EIN. You can apply for an EIN online by accessing the IRS website at www.irs.gov/businesses/ and clicking on Employer ID Numbers under Related Topics. You can get Forms W-7 and SS-4 from the IRS by visiting www.irs.gov or by calling 1-800-TAX-FORM (1-800-829-3676).

If you are asked to complete Form W-9 but do not have a TIN, write "Applied For" in the space for the TIN, sign and date the form, and give it to the requester. For interest and dividend payments, and certain payments made with respect to readily tradable instruments, generally you will have 60 days to get a TIN and give it to the requester before you are subject to backup withholding on payments. The 60-day rule does not apply to other types of payments. You will be subject to backup withholding on all such payments until you provide your TIN to the requester.

Note. Writing "Applied For" means that you have already applied for a TIN or that you intend to apply for one soon.

Caution: A disregarded domestic entity that has a foreign owner must use the appropriate Form W-8.

However, the following payments made to a corporation (including gross proceeds paid to an attorney under section 6045(f), even if the attorney is a corporation) and reportable on Form 1099-MISC are not exempt from backup withholding: medical and health care payments, attorneys' fees; and payments for services paid by a Federal executive agency.

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Part II. Certification

To establish to the withholding agent that you are a U.S. person, or resident alien, sign Form W-9. You may be requested to sign by the withholding agent even if items 1, 4, and 5 below indicate otherwise.

For a joint account, only the person whose TIN is shown in Part I should sign (when required). Exempt recipients, see *Exempt From Backup Withholding* on page 2.

Signature requirements. Complete the certification as indicated in 1 through 5 below.

- 1. Interest, dividend, and barter exchange accounts opened before 1984 and broker accounts considered active during 1983. You must give your correct TIN, but you do not have to sign the certification.
- 2. Interest, dividend, broker, and barter exchange accounts opened after 1983 and broker accounts considered inactive during 1983. You must sign the certification or backup withholding will apply. If you are subject to backup withholding and you are merely providing your correct TIN to the requester, you must cross out item 2 in the certification before signing the form.
- **3. Real estate transactions.** You must sign the certification. You may cross out item 2 of the certification.
- **4. Other payments.** You must give your correct TIN, but you do not have to sign the certification unless you have been notified that you have previously given an incorrect TIN. "Other payments" include payments made in the course of the requester's trade or business for rents, royalties, goods (other than bills for merchandise), medical and health care services (including payments to corporations), payments to a nonemployee for services, payments to certain fishing boat crew members and fishermen, and gross proceeds paid to attorneys (including payments to corporations).
- 5. Mortgage interest paid by you, acquisition or abandonment of secured property, cancellation of debt, qualified tuition program payments (under section 529), IRA, Coverdell ESA, Archer MSA or HSA contributions or distributions, and pension distributions. You must give your correct TIN, but you do not have to sign the certification.

What Name and Number To Give the Requester

| • | |
|---|---|
| For this type of account: | Give name and SSN of: |
| 1. Individual | The individual |
| Two or more individuals (joint account) | The actual owner of the account or, if combined funds, the first individual on the account ¹ |
| Custodian account of a minor (Uniform Gift to Minors Act) a. The usual revocable | The minor ² The grantor-trustee ¹ |
| savings trust (grantor is also trustee) | 3 |
| b. So-called trust account that is not a legal or valid trust under state law | The actual owner ¹ |
| 5. Sole proprietorship or single-owner LLC | The owner ³ |
| For this type of account: | Give name and EIN of: |
| Sole proprietorship or single-owner LLC | The owner ³ |
| 7. A valid trust, estate, or pension trust | Legal entity ⁴ |
| Corporate or LLC electing corporate status on Form 8832 | The corporation |
| Association, club, religious, charitable, educational, or other tax-exempt organization | The organization |
| 10. Partnership or multi-member LLC | The partnership |
| 11. A broker or registered nominee | The broker or nominee |
| 12. Account with the Department of Agriculture in the name of a public entity (such as a state or local government, school district, or prison) that receives agricultural program payments | The public entity |

List first and circle the name of the person whose number you furnish. If only one person on a joint account has an SSN, that person's number must be furnished.

Note. If no name is circled when more than one name is listed, the number will be considered to be that of the first name listed.

Privacy Act Notice

Section 6109 of the Internal Revenue Code requires you to provide your correct TIN to persons who must file information returns with the IRS to report interest, dividends, and certain other income paid to you, mortgage interest you paid, the acquisition or abandonment of secured property, cancellation of debt, or contributions you made to an IRA, or Archer MSA or HSA. The IRS uses the numbers for identification purposes and to help verify the accuracy of your tax return. The IRS may also provide this information to the Department of Justice for civil and criminal litigation, and to cities, states, and the District of Columbia to carry out their tax laws. We may also disclose this information to other countries under a tax treaty, to federal and state agencies to enforce federal nontax criminal laws, or to federal law enforcement and intelligence agencies to combat terrorism.

You must provide your TIN whether or not you are required to file a tax return. Payers must generally withhold 28% of taxable interest, dividend, and certain other payments to a payee who does not give a TIN to a payer. Certain penalties may also apply.

²Circle the minor's name and furnish the minor's SSN.

³You must show your individual name and you may also enter your business or "DBA" name on the second name line. You may use either your SSN or EIN (if you have one). If you are a sole proprietor, IRS encourages you to use your SSN.

⁴ List first and circle the name of the legal trust, estate, or pension trust. (Do not furnish the TIN of the personal representative or trustee unless the legal entity itself is not designated in the account title.)



Personnel Inventory Report

| Legal name of business | | | | | | | | Contract No: | | | | | | | | |
|---|----------------------|--------|----------------|--------|--------|-------|--------|--------------|---------------|--------|--------|---------|----------------------|--------|-----------------------|-----------------------|
| dba (if applicable)Telephone No: | | | | | | | | | | | | | | | | |
| Street addressCity | | | | | | | S | tate | | | Z | ip Co | de | | | |
| Submitted by: | | | | | | | | | | | | | | | | |
| Federal Tax Identificati | | | | | | | | | | | | | | | | |
| Do you have any emplo | oyees? | No | Y | es | - | Sole | Owne | er/Ope | rator | No | ` | Yes _ | | | | |
| If yes, list on the Employeach location listed belo (Month/Day/Year): | ow. Ir | ndicat | e whi | ch loc | ale (1 | ,2,3) | report | cove | s. Th | is rep | ort is | for Pa | | | | |
| 1 Business located | l withi | n Kir | ıg Coı | unty | | 3 | Bu | siness | locate | ed wi | th U.S | S. | | | | |
| 2 Businesses locat | ed wit | hin V | VA St | ate | | 4 | Otl | ner (sp | ecify) |) | | | | | | |
| Do any of your employ | yees b | elong | g to a | union | and/ | or do | you ı | ıse an | emp | loyee | refer | ral ag | gency | ? No_ | _Yes | <u> </u> |
| If yes, list the ments: expect to do more than | | | | | | | | | | | | | you | | If | you |
| with King County, the County Code Chapter 1 | union | | | - | | • | | | | | | | | | | |
| County Code Chapter 1 | union: 2.16. | s or e | employ Afr | yee re | ferral | agen | cies m | nust su | ibmit | a stat | emen | t of co | omplia Min | ance v | vith K | Sing abled |
| | union | s or e | employ Afr | yee re | ferral | • | cies m | iust si | ibmit | | emen | | omplia Min | ance v | vith K | King |
| County Code Chapter 1 | union 2.16. Wh | s or e | employ Afr Ame | yee re | ferral | agen | Na Ame | nust su | ibmit Hisp | a stat | Disa | t of co | omplia Min Sub | ance v | vith K Disa Sub | ing abled total |
| County Code Chapter 1 Job Categories | union 2.16. Wh | s or e | employ Afr Ame | yee re | ferral | agen | Na Ame | nust su | ibmit Hisp | a stat | Disa | t of co | omplia Min Sub | ance v | vith K Disa Sub | ing abled total |
| Job Categories Managerial | union 2.16. Wh | s or e | employ Afr Ame | yee re | ferral | agen | Na Ame | nust su | ibmit Hisp | a stat | Disa | t of co | omplia Min Sub | ance v | vith K Disa Sub | ing abled total |
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| Job Categories Managerial Professional Technical Clerical Sales | union 2.16. Wh | s or e | employ Afr Ame | yee re | ferral | agen | Na Ame | nust su | ibmit Hisp | a stat | Disa | t of co | omplia Min Sub | ance v | vith K Disa Sub | ing abled total |
| Job Categories Managerial Professional Technical Clerical Sales Service | union 2.16. Wh | s or e | employ Afr Ame | yee re | ferral | agen | Na Ame | nust su | ibmit Hisp | a stat | Disa | t of co | omplia Min Sub | ance v | vith K Disa Sub | ing abled total |
| Job Categories Managerial Professional Technical Clerical Sales Service Labor | union 2.16. Wh | s or e | employ Afr Ame | yee re | ferral | agen | Na Ame | nust su | ibmit Hisp | a stat | Disa | t of co | omplia Min Sub | ance v | vith K Disa Sub | ing abled total |
| Job Categories Managerial Professional Technical Clerical Sales Service Labor On-Job Trainees | union 2.16. Wh | s or e | employ Afr Ame | yee re | ferral | agen | Na Ame | nust su | ibmit Hisp | a stat | Disa | t of co | omplia Min Sub | ance v | vith K Disa Sub | ing abled total |
| Job Categories Managerial Professional Technical Clerical Sales Service Labor On-Job Trainees Apprentice | union 2.16. Wh | s or e | employ Afr Ame | yee re | ferral | agen | Na Ame | nust su | ibmit Hisp | a stat | Disa | t of co | omplia Min Sub | ance v | vith K Disa Sub | ing abled total |

Total number of employees reported above: ______ If no employees, write "0."

SUPPLEMENTAL FORM

Use this section to show your skilled craft workforce.

| Job Categories | Wh | ites | | ican ricans | Asi | ans | Nat Amer | tive ricans | Hisp | anics | Disa | bled | | ority total | | bled total |
|----------------|----|------|---|----------------|-----|-----|-------------|----------------|------|-------|------|------|---|----------------|---|---------------|
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| Apprentice | | | | | | | | | | | | | | | | |
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| Subtotal* | | | | | | | | | | | | | | | | |

^{*}Transfer subtotal to line to "Skilled Craft Total" on the front page. Contact the King County Procurement Services Section at (206) 684-1681 or the King County Business Development and Contract Compliance Section (206) 205-3442 if you have any questions concerning completion of this form.



Affidavit and Certificate of Compliance

with King County Code Chapter 12.16, Discrimination and Affirmative Action in Employment by Contractors, Subcontractors and Vendors

The undersigned, being first duly sworn, on oath states, s/he is authorized by the Contractor, and on the Contractor's behalf, affirms and certifies as follows:

Definitions: "Contractor" shall mean any contractor, vendor or consultant who supplies goods and/or services. "Contract" shall mean any contract, purchase order or agreement with King County Government, hereinafter called the County.

- Contractor recognizes that discrimination in employment is prohibited by federal, state and local laws. Contractor recognizes that in addition to refraining from discrimination, affirmative action is required to provide equal employment opportunity. Contractor further recognizes that this Affidavit establishes minimum requirements for affirmative action and fair employment practices and implements the basic nondiscrimination provisions of the general contract specifications as applied to service, consultant, and vendor contracts exceeding \$25,000, or public work contracts exceeding \$10,000. Contractor herein agrees that this Affidavit is incorporated as an addendum to its general contract, and recognizes that failure to comply with these requirements may constitute grounds for application of sanctions as set forth in the general specifications, King County Code Chapter 12.16 ("Chapter") and this Affidavit. PROVIDED FURTHER, that in lieu of this Affidavit, the Executive may accept a statement pledging adherence to an existing contractor affirmative action plan where the provisions of the plan are found by the Executive to substantially fulfill the requirements of the Chapter.
- **B.** Contractor shall give notice to their supervisors and employees of the requirements for affirmative action to be undertaken prior to the commencement of work.
- C. This person has been designated to represent the Contractor and to be responsible for securing compliance with and for reporting on the affirmative actions taken:
- O. Contractor will cooperate fully with the BD and Contract Compliance Section and appropriate County agents while making every reasonable "good faith" effort to comply with the affirmative action and nondiscrimination requirements set forth in this Affidavit and in King County Code Chapter 12.16.
- E. Reports: The Contractor agrees to complete and submit as required such additional reports and records that may be necessary to determine compliance with the Affidavit and to confer with the County Compliance Officer at such times as the County shall deem necessary. The information required by the Chapter includes but is not limited to the following reports and records:
 - Personnel Inventory Report: This report shall include a breakdown of the employer workforce showing race, sex and handicapped and other minority data.
 - Monthly EEO Report: This report shall apply to construction contractors and subcontractors and shall provide the number of hours of employment for all employees, including minority, women and disabled employees by craft and category.
 - Statement from Union or Worker Referral Agency: This statement affirms that the signee's organization has no practices and policies which discriminate on the basis of race,

color, creed, religion, sex, age, marital status, sexual orientation, nationality or the presence of sensory, mental or physical disability.

The information required in this section shall be submitted on forms provided by the County unless otherwise specified.

- F. Subcontractors: For public works projects and contracts over ten thousand dollars (\$10,000) the prime contractor shall be required to submit to the County, along with its qualifying documents under the Chapter, employment profiles, Affidavits and Certificates of Compliance, Reports and Union Statements from its subcontractors in the same manner as these are required of the prime contractor. Reporting requirements of the prime contractor during the contract period will apply equally to all subcontractors.
- G. Employment Goals for Minorities, Women and Persons with Disabilities: No specific levels of utilization of minorities and women in the workforce of the Contractor shall be required, and the Contractor is not required to grant any preferential treatment on the basis of race, sex, color, ethnicity or national origin in its employment practices. Notwithstanding the foregoing, any affirmative action requirements set forth in any federal regulations, statutes or rules included or referenced in the contract documents shall continue to apply.
- H. Affirmative Action Measures: Contractor agrees to implement and/or maintain reasonable good faith efforts to comply with King County Code Chapter 12.16. The evaluation of a contractor's compliance with the Chapter shall be based upon the contractor's effort to achieve maximum results from its affirmative action measures. The Contractor shall document these efforts and shall implement affirmative action steps at least as extensive as the following:
 - 1. Policy Dissemination: Internal and external dissemination of the contractor's equal employment opportunity policy; posting of nondiscrimination policies and of the requirement of the Chapter on bulletin boards clearly visible to all employees; notification to each subcontractor, labor union or representative of workers with which there is a collective bargaining agreement or other contract, subcontract, or understanding of the contractor's commitments under the Chapter. Inclusion of the equal opportunity policy in advertising in the news media and elsewhere.
 - 2. Recruiting: Adopt and implement recruitment procedures designed to increase the representation of women, minorities and persons with disabilities in the pool of applicants for employment: including, but not limited to establishing and maintaining a current list of minority, women and disabled recruitment sources, providing these sources written notification of employment opportunities and advertising vacant positions in newspapers and periodicals which have minority, women and/or disabled readership.
 - 3. Self-Assessment and Test Validation: Review of all employment policies and procedures, including tests, recruitment, hiring and training practices and policies, performance evaluations, seniority policies and practices, job classifications and job assignments to assure that they do not discriminate against, or have a discriminatory impact on, minorities, women and persons with disabilities and validate all tests and

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- other selection requirements where there is an obligation to do so under state or federal law.
- 4. Record Referrals: Maintain a current file of applications of each minority, women and persons with disabilities who are applicants or referrals for employment indicating what action was taken with respect to each such individual and the reasons therefor. Contact these people when an opening exists for which they may be qualified. Names may be removed from the file after twelve months have elapsed from their last application or referral.
- 5. Notice to Unions: Provide notice to labor unions of the contractor's nondiscrimination and affirmative action obligations pursuant to King County Code Chapter 12.16. Contractors shall also notify the BD and Contract Compliance Section if labor unions fail to comply with the nondiscrimination or affirmative provisions
- 6. Supervisors: Ensure that all supervisory personnel understand and are directed to adhere to and implement the nondiscrimination and affirmative action obligations of the contractor under King County Code Chapter 12.16. Such direction shall include, but not be limited to, adherence to, and achievement of, affirmative action policies in performance appraisals of supervisory personnel.
- 7. Employee Training: When reasonable, develop on-the-job training opportunities which expressly include minorities, women, and persons with disabilities and sponsor and/or utilize, training/educational opportunities for the advancement of women, minorities and persons with disabilities employed by the contractor, subject to acceptance by the county.
- Responsible Person: Designate an employee who shall have the responsibility for implementation of the Contractor's affirmative action measures.
- 9. Progress Reporting: Prepare as part of the affirmative action plan an analysis and report on the progress made toward eliminating the underrepresentation of minorities, women, and persons with disabilities in the contractor's workforce on an

Contractor

annual basis.

- I. During the performance of this Contract, neither the Contractor nor any party subcontracting under the authority of this Contract shall discriminate nor tolerate harassment on the basis of race, color, sex, religion, nationality, creed, marital status, sexual orientation, age, or the presence of any sensory, mental or physical disability in the employment or application for employment or in the administration or delivery of services or any other benefits under this Contract.
- J. Contractor agrees to provide reasonable access upon request to the premises of all places of business and employment, relative to work undertaken in this Contract, and to records, files, information and employees in connection therewith, to the BD and Contract Compliance Section or agent for purposes of reviewing compliance with the provisions of this Affidavit and agrees to cooperate in any compliance review.
- K. Should the BD and Contract Compliance Section find, upon complaint investigation or review, the Contractor not to be in good faith compliance with the provisions contained in this Affidavit, it shall notify the County and Contractor in writing of the finding fully describing the basis of non-compliance. Contractor may request withdrawal of such notice of noncompliance at such time as the compliance office has notified in writing the Contractor and the County that the noncompliance has been resolved.
- L. The Contractor agrees that any violation of any term of this Affidavit, including reporting requirements, shall be deemed a violation of King County Code Chapter 12.16. Any such violation shall be further deemed a breach of a material provision of the Contract between the County and the Contractor. Such breach may be grounds for implementation of any sanctions provided for in the Chapter, including but not limited to, cancellation, termination or suspension, in whole or part, of the Contractor by the County; liquidated damages; or disqualification of the Contractor PROVIDED, that the implementation of any sanctions is subject to the notice and hearing provisions of King County Code Chapter 12.16.110.

| Company Name | Street Address | City | State Z | Zip |
|--|----------------|-------------|-----------------------|------------------------|
| I have read and understood the foregoing; and am a Affidavit and Certificate of Compliance and therefore | | | gree to the terms and | conditions of this and |
| Authorized Signer: | | | | |
| Name (type or print) | Title | Phone | Signature | |
| V | ALID ONLY I | F NOTARIZED | | |
| SUBSCRIBED AND SWORN TO BEFOR M | E THIS | DAY OF | , 200 | <u>_</u> . |
| Notary Public in and of the state of | | _ | | |
| Residing at : | | | | |



Statement of Compliance with King County Code Chapter 12.16 Discrimination and Affirmative Action in Employment by Contractors, Subcontractors and Vendors

UNION OR EMPLOYEE REFERRAL AGENCY STATEMENT

| The un | dersigned states as follows: | | | | | | | |
|----------|---|--|---|--|--|--|--|--|
| A. | That I am the authorized officer of the union/employee referral agency. | | and am signing this statement on behalf o | | | | | |
| В. | . That the organization recognizes that King County Code Chapter 12.16 prohibits discrimination in employment and referrals for employment on the basis of race, color, creed, religion, sex, age, national organization, sexual orientation, or the presence of any sensory, mental, or physical disability. | | | | | | | |
| | agrees that recruitment, employment, and County shall be in accordance with the pullibration however, that no specific levels of utilization contractor is not required to grant any presorigin in its employment practices, and paction requirements set forth in any feder documents shall continue to apply. | ovision of King County Counter the terms and conditions of the terms and provisions of I on of minorities and wome ferential treatment on the burning formula further that, not we ral regulations, statutes or the counter of the coun | ion and agrees to affirmatively cooperate in ode Chapter 12.16. The organization further of employment under all contracts with King King County Code Chapter 12.16; provided in in the workforce shall be required, and the asis of race, sex, color, ethnicity or national withstanding the foregoing, any affirmative rules included or referenced in the contract | | | | | |
| This sta | atement shall be valid for a period of two (2) |) years. | | | | | | |
| Authoriz | zed Union/Employee Referral Agency Representative | Union/Employee Referral Ager | ncy | | | | | |
| Telephor | ne Number | Address | | | | | | |
| Signatur | e e | City, State, Zip | | | | | | |
| Title | | | | | | | | |

| County, a | appears on the reverse of this explanatory letter. | | |
|-----------------------|--|---|----------------------------------|
| TO: | | FROM: | _ |
| RE: | Compliance with King County Code Chapter 12.16, Subcontractors and Vendors". | "Discrimination and Affirmative Action in | Employment by Contractors |
| business in an agg | unty Code Chapter 12.16 and the supporting Affidavit a with King County in an aggregate amount of \$10,000 ogregate amount of \$25,000 submit a statement of cor & Contract Compliance Division. | or more per year and all other contractors do | ing business with King County |
| "discrimi | ement of compliance is to ensure that the union/empl nate against any person on the basis of race, color, cre of any sensory, mental or physical disability" in employ | eed, religion, sex, age, nationality, marital s | |
| of your u | ort to comply with King County Code Chapter 12.16, or nion/employee referral agency. In the event that you and shall set forth what efforts have been made to secure | refuse to sign this statement of compliance, | |
| | s agreement has been signed and returned to the King two years and applicable to all County contracts for a p | | Division, it will be valid for a |
| | itten response is required in this office on or before preciated. | You | r cooperation in this matter is |
| Authorize | d Signer I | Date | |
| See reve | rse of this form for a compliance statement suitable t | to meet the requirements of King County | Code Chapter 12.16. |

NOTE: The following letter explains the requirements of King County Code Chapter 12.16. Complete the address blocks below and forward to your union(s) or employee referral agency. A statement of compliance with Chapter 12.16, suitable for submission to King